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Application

Question List

Process Manager / FY17Cyc1 Project Grants for Individuals / FY16Cyc2 Project Grants for Individuals / Preview

Info: Fields with an asterisk (\*) are required.

▼

Project Name\*

Please provide a three to seven word title for your project. Example: Community Mural Project

Project Summary\*

Please describe your project in 2-3 sentences. NOTE: This summary will be the description of your project on all public records. Please use a third person description, such as: ABC Artist plans to hold an outdoor summer concert at XYZ Park.

[400 characters left of 400]

Amount Requested\*

Project Grant requests may range from \$500 - \$5,000

\$

Applicant Status\*

Please enter 01 Individual

Applicant Institution\*

Please enter the code that best describes who is applying for this grant

Applicant Discipline\*

Select the primary numeric code that best describes your main art form. Use of supplemental letters (e.g. 01A or 01B) is encouraged, but optional.

For definitions of these fields, see this guide to the National Standard data fields.

Project Discipline\*

Choose the primary arts discipline of this project. Use of subdisciplines (01A for Ballet instead of 01 for Dance) is encouraged.

For definitions of these fields, see this guide to the National Standard data fields.

Grantee Race\*

Our federal funders require that we ask for information on the race/ethnicity of our grantees. This question is

optional for applicants, but will be required if you receive a grant. If you provide us with this information now, you may select any combination of the below that apply.

- ☐ A Asian
- ☐ B Black/African American
- ☐ H Hispanic/Latino
- ☐ N American Indian/Alaska Native
- ☐ P Native Hawaiian/Pacific Islander
- ☐ W White

**Arts Education\***

Use this field to describe the arts education component of your project, according to the following definition: "An organized and systematic educational effort with the primary goal of increasing an identified learner's knowledge of and/or skills in the arts with measurable outcomes."

Generally, this would mean that you have a relationship with a school/group of schools that involves program planning in conjunction with State curriculum goals, as well as ongoing coordination between the artist and school teachers/administrators.

This field pertains to percentage of students participating in organized educational programming, not simply the number of youth participating in the project.

**Congressional District of Applicant\***

District of the United States House of Representative in which your home address is located (this must be a street address and NOT a post office box). In Rhode Island it is either District 001 or District 002. Please enter leading 00.

To find your Congressional district go to <http://www.sos.ri.gov/vic>

**Rhode Island House District of Applicant\***

The Rhode Island House of Representatives district in which your home address is located (this must be a street address and NOT a post office box).

This is a number from 1 through 75 and can be found by entering your address information at <http://www.sos.ri.gov/vic>

**Rhode Island Senate District of Applicant\***

District of the Rhode Island Senate in which your home address is located (this must be a street address and NOT a post office box).

This is a number from 1 through 33 and can be found by entering your address information at <http://www.sos.ri.gov/vic>

**Activity Type\***

Select the code that best describes the activities of the project. Please be aware that not all of the activities listed below are funded by RISCA.

**Adults Engaged\***

Enter the number of adults who directly engaged with the arts, whether through attendance at arts events or participation in arts learning or other types of activities in which people were directly involved with artists or the arts. Do not count individuals primarily reached through TV, radio or cable broadcast, the Internet, or other media. Include actual audience numbers based on paid/free admissions or seats filled. Avoid inflated numbers, and do not double-count repeat attendees.

**Children/Youth (under age 18) Engaged\***

Enter the number of children/youth who directly engaged with the arts, whether through attendance at arts events

or participation in arts learning or other types of activities in which people were directly involved with artists or the arts. Do not count individuals primarily reached through TV, radio or cable broadcast, the Internet, or other media. Include actual audience numbers based on paid/free admissions or seats filled. Avoid inflated numbers, and do not double-count repeat attendees.

#

**Artists Directly Involved\***

Number of artists directly involved in providing artistic services specifically identified with the award. Include living artists whose work is represented in an exhibition regardless of whether the work was provided by the artist or by an institution. If no artists were directly involved in providing artistic services enter 0.

#

**Population Benefited by Race/Ethnicity: (select all that apply)\***

Select all categories that, by your best estimate, made up 25% or more of the population that directly benefited from the award during the period of support. These responses should refer to populations reached directly, rather than through broadcasts or online programming.

- ☐ N American Indian/Alaska Native
- ☐ A Asian
- ☐ B Black/African American
- ☐ H Hispanic/Latino
- ☐ P Native Hawaiian/Other Pacific Islander
- ☐ W White
- ☐ G No single group made up more than 25% of the population directly benefited

**Population Benefited by Age: (select all that apply)\***

Select all categories that, by your best estimate, made up 25% or more of the population that directly benefited from the award during the period of support. These responses should refer to populations reached directly, rather than through broadcasts or online programming.

- ☐ 1 Children/Youth (0-18 years)
- ☐ 2 Young Adults (19-24 years)
- ☐ 3 Adults (25-64 years)
- ☐ 4 Older Adults (65+ years)
- ☐ 9 No single age group made up more than 25% of the population directly benefited

**Population Benefited by Distinct Groups: (select all that apply)\***

Select all categories that, by your best estimate, made up 25% or more of the population that directly benefited from the award during the period of support. These responses should refer to populations reached directly, rather than through broadcasts or online programming.

- ☐ D Individuals with Disabilities
- ☐ I Individuals in Institutions (hospitals, nursing homes, correctional facilities, shelters, etc)
- ☐ P Individuals below the Poverty Line
- ☐ E Individuals with Limited English Proficiency
- ☐ M Military Veterans/Active Duty Personnel
- ☐ Y Youth at Risk
- ☐ G No single distinct group made up more than 25% of the population directly benefited

**▼ Applicant Eligibility**

GUIDELINES FOR PROJECT GRANTS FOR INDIVIDUALS are available at <http://www.arts.ri.gov/grants/Individuals/pgguidelines-fy17revised.pdf>. Potential applicants to PGI must review the entire document and contact Cristina DiChiera at [cristina.dichiera@arts.ri.gov](mailto:cristina.dichiera@arts.ri.gov) or 401-222-3881 before submitting a PGI application.

Past Fellowship or Grant recipients may not reapply for RISCA support unless all final reports for previous awards have been submitted according to grant contract guidelines. Project Grant applicants MAY apply for a Fellowship and a Project Grant at the same deadline.

**Are you a US citizen or Green Card holder and a resident of the State of Rhode Island?\***

You must be A United States citizen or Green Card holder and a current, legal resident of the State of Rhode Island. You must have established legal residence in Rhode Island for a minimum of twelve consecutive months prior to the date of application and you must be a current legal resident of the State of Rhode Island at the time that grant funds are disbursed. Rhode Island State Law (§44-30-5) defines a "resident" as someone "who is

domiciled in this state" or "who is not domiciled in this state but maintains a permanent place of abode in this state and is in this state for an aggregate of more than one hundred eighty-three (183) days of the taxable year. If an individual selected for a grant award is no longer a resident of the State of Rhode Island when funds are to be disbursed, the grant award may be withdrawn.

☐ Yes

☐ No

**Are you over 18 years of age?\***

*Applicants must be at least eighteen years of age.*

☐ Yes

☐ No

**Are you a student in an arts degree program?\***

*Students attending high school or students pursuing undergraduate or graduate degrees in an arts discipline or an arts-related subject area at the time of application may not apply.*

☐ Yes

☐ No

▼ Project Eligibility

**Is this proposal for an individual program or project?\***

- Individuals who are on the staff or board of a non-profit organization cannot apply for funding for projects that are part of that organization's programming.
- Individuals who are paid staff or proprietors of a business or corporation cannot apply for funding for projects that are a product or service of that organization.
- Individuals and organizations cannot apply for funding for the same project at the same deadline.
- ☐ This proposal does not seek funds for a program or project of an organization or business.

**Expenses that RISCA does not fund\***

Council support may NOT be used for:

- Capital expenses such as building improvements or the purchase of permanent equipment
- Eliminating or reducing existing debt
- Fundraising efforts, such as social events or benefits
- Hospitality expenses, such as food and beverages
- Expenses incurred prior to or after the grant cycle in which a grant has been awarded (7/1-6/30 for April 1 deadline; 1/1-6/30 for October 1 deadline)
- Applications where the purpose is to "regrant" or award funds using some or all of the RISCA grant funds; Prizes and awards
- Activities that are part of a graduate or undergraduate degree program, or for which academic credit is received
- Projects that proselytize or promote religious activities, or which take place as part of a religious service
- Performances and exhibitions not available to the general public, or that are inaccessible to people with disabilities
- ☐ I understand that I cannot use RISCA funds for the items and activities listed above

▼ Project Information

**Project Start Date\***

What date would RISCA funded activities begin? (For the April 1 deadline this is no earlier than July 1; for October 1 deadline this is no earlier than January 1 of next year)

**Project End Date\***

What date would RISCA funded activities end? (This date can be no later than June 30 of next year).

**Project Description\***

Describe your arts project, including the steps you and any project partners will take to accomplish it. Please also describe desired outcomes.

[3500 characters left of 3500]

**Project Location\***

Where will the project take place? List all venues including rehearsal spaces, fabrication studios, performance and exhibition venues, workshop sites, etc.

[2500 characters left of 2500]

**Will all public activities take place in physically accessible sites or venues?\***

*All RISCA funded projects and programs must comply with ADA Accessibility Guidelines.*

*[www.nea.gov/resources/Accessibility/Planning/BriefChecklist.pdf](http://www.nea.gov/resources/Accessibility/Planning/BriefChecklist.pdf)*

☐ Yes, all public activities will take place in accessible sites or venues.

**Project Timeline\***

Please provide a detailed timeline of your project, from planning through completion. Please note that all RISCA funded activities must take place within the appropriate grant period (April 1 grant period is July 1 - June 30 of next year; October 1 grant period is January 1 - June 30 of next year).

[2500 characters left of 2500]

**Project Partners\***

Describe any people, groups, or entities that are involved in your project. Please explain how they are involved, including talents, resources and expertise they will bring to the project. (You may include venues that are offering their site and providing a site manager for free, partnering artists, organizations that will be providing assistance, etc.)

[3000 characters left of 3000]

**Applicant Background\***

Provide a brief description of any past experience you have had which may contribute to the success of the project.

[2500 characters left of 2500]

**Project Audience\***

Who is your intended audience and how will you attract that audience or group of participants to your project? (For example, do you plan to reach out to specific media outlets; will you print flyers, posters, build a weblog, send emails; do you or your partners have media or audience contact lists that you will send emails or mailings to? Etc.)

[2500 characters left of 2500]

**Public Impact of the Project\***

How will your project benefit citizens of our state and how will you measure that impact? How will you know that your project achieved your desired outcomes?

[2500 characters left of 2500]

**Additional Information**

Use this space to provide any information that was not requested in the application questions, but is important for the Grant Review Panel's understanding of the project. (Not required)

[2500 characters left of 2500]

**▼ Project Budget****Project Budget\***

[Click here](#) for the Project Grants to Individuals Budget form. Once the form is completed, save in either Excel or PDF format and then click below to upload and attach the Project Budget to your application. If you have difficulty with the Project Budget form, you may upload a project budget in another format, saved as a pdf.

The numbers in your attached budget must match the numbers you enter below. Project income **MUST EQUAL** project expenses.

[2 MiB allowed]

**Total Project Expenses\***

Please enter the total amount of your project expenses. This figure should match the Total Expenses on your attached budget

**Total Project Income\***

Please enter the total for all sources of income, including your RISCA grant request. This figure should match the Total Income on your attached budget.

**Total In-Kind Donations:\***

Please enter a cash value for the total of all in-kind contributions to your project during the grant period. These may include free labor, free or discounted rental fees, donated materials, etc. (If none is expected, enter 0.)

**▼ Project Support Materials**

**Work samples and support materials are an extremely important part of the Project Grant Panel review process.**

Samples of work completed within the past three (3) years by the applicant and artists to be featured in the proposed project should be documented in a professional manner and uploaded to this application.

Other suggested support materials for your project include:

- Brochures, postcards, catalogs and other mailings
- Select press and publicity
- Sample publications
- Letters of support

You are not required to upload material in all 7 boxes, though a variety of materials is encouraged in order to illustrate the strengths of your project to the review panel.

In the text box provided for each item, please list the title, year of completion, duration, medium, dimensions, etc. where applicable. Please limit audio and video clips to no more than 2 minutes. (If a sample is longer than two minutes, please indicate start and end times for the clip you would like the panel to review.)

**PLEASE NOTE:** The online system can accommodate images, text documents, video, and audio in most formats, however **there is a 29 MB limit for ALL support materials combined.** We recommend that video be uploaded to a site such as Vimeo or Youtube, and links provided in the link boxes below. Links to artist websites can also be submitted as support materials.

If you do not have a PDF converter, this online application system has a Fax to File function (left side bar) that allows you to fax document pages to a designated fax number that will convert them into a PDF. This PDF can be saved to your computer and then must be uploaded to your application. Free PDF conversions are also available online.

If you have trouble uploading media online you may email files to [cristina.dichiera@arts.ri.gov](mailto:cristina.dichiera@arts.ri.gov) or DVDs and CDs can be sent by the deadline date to: Cristina DiChiera, Rhode Island State Council on the Arts, One Capitol Hill, 3rd Floor, Providence, RI 02908

All support materials not uploaded to the online system must arrive at the RISCA offices by the deadline date.

#### Support Material 1

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

#### Support Material 2

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

#### Support Material 3

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

#### Support Material 4

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

Support Material 5

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

Support Material 6

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

Support Material 7

[1000 characters left of 1000]

Upload a file

[2 MiB allowed]

Support Material 8

[1000 characters left of 1000]

Upload a file

[5 MiB allowed]

Support Material 9

[1000 characters left of 1000]

Upload a file

[5 MiB allowed]

Support Material 10

[1000 characters left of 1000]

Upload a file

[5 MiB allowed]

Website Link



**Website Link****Website Link****Website Link****Website Link****▼ Support Materials List****Support Materials List\***

Please attach a numbered list of all support materials that you are submitting with your application. Please include all letters of support, images, discs or media files, resumes of participating artists, website links, etc.

[2 MiB allowed]

**▼ Assurances**

The applicant agrees to abide by all the General Terms and Conditions and Assurances as outlined at <http://www.arts.ri.gov/legal>, and has reviewed this information prior to submitting this application. By submitting your application you are agreeing to abide by all of these federal and state terms and conditions if you receive support from RISCA. The applicant understands that all grant applications are considered on a competitive basis. No applicant is guaranteed funding at any level, even if all basic criteria have been met. Prior funding does not guarantee support in current or future years. The applicant understands that all RISCA grant award programs are contingent upon the availability of funds from the General Assembly of the State of Rhode Island and the National Endowment for the Arts, a federal agency.

The applicant will assure that it and any organization assisted by it will comply with Titles I - IV of the Americans with Disabilities Act of 1990 (PL 101-336), as amended, Title VI and VII of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq., PL 88-352) as amended, Sections 503 & 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Equal Employment Opportunity Act of 1972 (PL 92-261), Rhode Island Executive Order #19, 1977, and where applicable, Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), to the end that no person in the United States shall, on the grounds of race, color, religion, sex, age, national origin, handicap, or sexual orientation, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the applicant received financial assistance from the Council.

It is understood by the applicant and the Rhode Island State Council on the Arts (RISCA) that RISCA reserves the right to use any text, photographs, audio, or video submitted as part of this application for limited non-commercial educational or promotional use in publications or other media produced, used or contracted by RISCA including, but not limited to: brochures, invitations, newsletters, postcards, websites, etc.

The applicant will certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of their knowledge, and that the applicant is an eligible individual as specified in the guidelines.

**By checking this box I agree to all of the above:\***

☐ I agree to the above Assurances

**The deadline for this application is 11:59 PM on April 1. THERE ARE NO EXCEPTIONS.**

